

Application Data Sheet

Application Information

Application Type:: Regular
Subject Matter:: National Phase
Suggested Group Art Unit:: N/A
CD-ROM or CD-R?:: None
Sequence submission?:: None
Computer Readable Form (CRF)?:: No
Title:: PARTICLE BEAM ACCELERATOR
Attorney Docket Number:: 0020-5520PUS1
Request for Early Publication?:: No
Request for Non-Publication?:: No
Total Drawing Sheets:: 8
Small Entity?:: No
Petition included?:: No
Secrecy Order in Parent Appl.?:: No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Japan
Status:: Full Capacity
Given Name:: Hidehiro
Family Name:: IIDA
City of Residence:: Suita-Shi
Country of Residence:: Japan
Street of mailing address:: c/o National Cardiovascular Center,
7-1, Fujishirodai 5-chome
City of mailing address:: Suita-Shi

State or Province of mailing address:: Osaka
Country of mailing address:: Japan
Postal or Zip Code of mailing address:: 565-8565

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Japan
Status:: Full Capacity
Given Name:: Toru
Family Name:: INOMATA
City of Residence:: Suita-Shi
Country of Residence:: Japan
Street of mailing address:: c/o National Cardiovascular Center,
7-1, Fujishirodai 5-chome
City of mailing address:: Suita-Shi
State or Province of mailing address:: Osaka
Country of mailing address:: Japan
Postal or Zip Code of mailing address:: 565-8565

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Japan
Status:: Full Capacity
Given Name:: Mamoru
Family Name:: FUJIWARA
City of Residence:: Suita-Shi
Country of Residence:: Japan
Street of mailing address:: c/o National Cardiovascular Center,
7-1, Fujishirodai 5-chome
City of mailing address:: Suita-Shi
State or Province of mailing address:: Osaka

Country of mailing address:: Japan
Postal or Zip Code of mailing address:: 565-8565

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Japan
Status:: Full Capacity
Given Name:: Iwao
Family Name:: MIURA
City of Residence:: Suita-Shi
Country of Residence:: Japan
Street of mailing address:: c/o National Cardiovascular Center,
7-1, Fujishirodai 5-chome
City of mailing address:: Suita-Shi
State or Province of mailing address:: Osaka
Country of mailing address:: Japan
Postal or Zip Code of mailing address:: 565-8565

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Japan
Status:: Full Capacity
Given Name:: Toshihiro
Family Name:: OTA
City of Residence:: Kobe-Shi
Country of Residence:: Japan
Street of mailing address:: c/o Molecular Imaging Laboratory, Inc.,
Institute of Biomedical Research and
Innovation,
2-2, Minatojimaminamimachi, Chuo-ku
City of mailing address:: Kobe-Shi

State or Province of mailing address:: Hyogo
Country of mailing address:: Japan
Postal or Zip Code of mailing address:: 650-0047

Correspondence Information

Correspondence Customer Number:: 02292

Representative Information

Representative Customer Number:: 02292

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application is a	National Stage of	PCT/JP2005/006579	03/29/05

Foreign Priority Information

Country::	Application number::	Filing Date::	Priority Claimed::
Japan	2004-095534	03/29/04	Yes

Assignee Information

Assignee name:: JAPAN AS REPRESENTED BY THE
PRESIDENT OF NATIONAL
CARDIOVASCULAR CENTER
Street of mailing address:: 7-1, Fujishirodai 5-chome
City of mailing address:: Suita-Shi, Osaka
Country of mailing address:: Japan
Postal or Zip Code of mailing address:: 565-8565

Assignee name:: Molecular Imaging Laboratory, Inc.

Street of mailing address:: c/o Institute of Biomedical Research and
Innovation, 2-2, Minatojimaminamimachi, Chuo-
ku

City of mailing address:: Kobe-Shi

State or Province of mailing address:: Hyogo

Country of mailing address:: Japan

Postal or Zip Code of mailing address:: 650-0047